

UNITED STATES HOUSE OF REPRESENTATIVES

Periodic Transaction Report

NAME: Ann Wagner

OFFICE TELEPHONE: (202) 225-1621

☒

Member of the U.S. House of Representatives
State: Missouri District: 02
File an original and 2 copies

☐

Officer or Employee
Employing Office: _____
File an original and 1 copy

Did you purchase any shares that were allocated as a part of an Initial Public Offering? ☐ Yes ☒ No

Please indicate whether this is an initial report or an amended report. For amendments, please provide the date of the report you are amending. ☒ Initial Report ☐ Amendment

If you answered "Yes" to this question, please contact the Committee on Ethics for further guidance.

Date of Report Being Amended: _____

LEGISLATIVE RESOURCE CENTER
2021 JUL -9 AM 10: 05
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(For Official Use Only)

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

FULL ASSET NAME	TYPE OF TRANS-ACTION	DATE OF TRANS-ACTION	DATE NOTIFIED OF TRANS-ACTION	AMOUNT OF TRANSACTION										
				A	B	C	D	E	F	G	H	I	J	K
SP DC JT	Purchase Sale Exchange	(MM/DD/YY)	(MM/DD/YY)	\$1,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Transaction in a Spouse or Dependent Child Asset over \$1,000,000
JT		02/05/015	03/07/15		X									
JT		06/30/21					X							
JT														

NAME: _____ **Page** 1 **of** 1

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FULL ASSET NAME		TYPE OF TRANS-ACTION			DATE OF TRANS-ACTION	DATE NOTIFIED OF TRANS-ACTION	AMOUNT OF TRANSACTION										
		Purchase	Sale	Exchange	(MM/DD/YY)	(MM/DD/YY)	A	B	C	D	E	F	G	H	I	J	K
SP DC JT	Provide full name, not ticker symbol.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			\$1,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,00	\$25,000,001-\$50,000,000	Over \$50,000,000	Transaction in a Spouse or Dependent Child Asset over \$1,000,000
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NOTE NUMBER	FILER NOTES (optional)